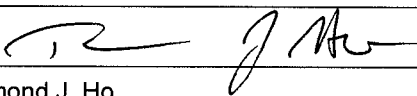


<h1>TRANSMITTAL FORM</h1> <p><i>(to be used for all correspondence after initial filing)</i></p>		Application Number	10/517,108-Conf. #1317
		Filing Date	December 7, 2004
		First Named Inventor	Adrianus Sempel
		Art Unit	2629
		Examiner Name	W. Boddie
Total Number of Pages in This Submission		Attorney Docket Number	32350-258519

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input checked="" type="checkbox"/> Statement Under 37 CFR 3.73(b) <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <p style="text-align: center;">- Yellow Filing Receipt</p>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	VENABLE LLP		
Signature			
Printed name	Raymond J. Ho		
Date	June 10, 2008	Reg. No.	41,838

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2008

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 0.00

Complete if Known

Application Number 10/517,108-Conf. #1317
Filing Date December 7, 2004
First Named Inventor Adrianus Sempel
Examiner Name W. Boddie
Art Unit 2629
Attorney Docket No. 32350-258519

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

Total Claims Extra Claims Fee (\$) Fee Paid (\$)
_____ - 20 = _____ x _____ = _____
HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)
_____ - 3 = _____ x _____ = _____
HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims
Fee (\$) Fee Paid (\$)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)
_____ - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

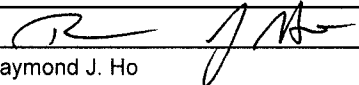
4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

Fees Paid (\$)

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	41,838	Telephone	(703) 760-1977
Name (Print/Type)	Raymond J. Ho	Date	June 10, 2008		

Venable Filing NumberAtty. Docket No: 32350-258519Title of Application: LINE SCANNING IN A DISPLAYApplication No: 10/517,108

Patent No. : _____

Attorney/LAA: _____

RJH/srj

PTO Due Date: _____

Current Date: _____

June 10, 2008

Filing Date: _____

December 7, 2004

Issue Date: _____

The following items were received from Venable LLP, Washington, D.C., by the U.S. Patent & Trademark Office
on the date stamped hereon:

U.S. PTO FEES ENCLOSED☒ Transmittal Letter (PTO/SB/21)☒ Fee Transmittal Letter (PTO/SB/17)

New U.S. Patent Application

(____ pages of specification/claims)

Rule 53(d) Continued Prosecution Application

Rule 53(b) Continuation or Divisional Application

(attach copy of specification, claims, drawings and declaration)

U.S. National Stage Application of PCT Application

Request for Continued Examination (RCE) under 37 CFR 1.114

Application Data Sheet

Substitute Specification

Priority Document-Cert. Copy of

Appln.#: _____; Country: _____; Date Filed: _____

Formal Drawings (____ sheets, Figs.)

Inventor Declaration

Assignment w/Cover Sheet

Response to Notice to File Missing Parts

Response to Notice to File Missing Requirements

Response to Requirement

Information Disclosure Statement with cited references

Response

Amendment / Preliminary Amendment

Petition/Request for Extension of Time (mo. ext.)

☒ Revocation and Power of Attorney☒ Statement Under 37 CFR 3.73(b)☒ Yellow Filing Receipt

Request for Non-Publication

Request to Rescind Non-Publication Request

Terminal Disclaimer

Notice of Appeal

Appeal Brief (*in triplicate*) / Reply Brief (*in triplicate*)

Request for Oral Hearing

Confirmation of Hearing Petition

Issue Fee Transmittal

Certificate of Correction

Maintenance Fee Transmittal

Status Inquiry

Other: (*Please describe below*)

____ Filing Fee

____ Search Fee

____ Examination Fee

____ Additional Claim Fee

____ Extension Fee

____ IDS Fee

____ Recordation Fee

____ Notice of Appeal Fee

____ Brief on Appeal

____ Oral Hearing Request Fee

____ Petition Fee

____ Issue Fee

____ Publication Fee

____ Certificate of Correction Fee

____ Maintenance Fee

____ Other Fees (Describe)

0.00 **Total Fees Paid****Charge the above fees as follows:**☐ USPTO Deposit Account No. 22-0261☐ USPTO Deposit Account No. _____☒ USPTO not to charge any Deposit Account

Reviewed By: _____

Signature of Attorney

Date

6/10/08